

POSITION	ID NO.	DATE
CLASSIFIER	21	6/4/93
EXAMINER	354	6-7-93
TYPIST	323	6-9
VERIFIER	314	6-11-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	3/2/93
2	3/2/93
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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SYMBOLS

✓	Rejected
=	Allowed
· (Through number)	Canceled
+	Restricted
N	Non-elected
—	Interference
A	Appeal
O	Objected

Claim	Date
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(LEFT INSIDE)

BEST AVAILABLE CO